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**CHARLES LOUIS TAYLOR.**

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The speedy recurrence of subsequent attacks is accounted for by the fact that the skin having desquamated, the new skin would be more easily irritated than its predecessor. And as this occurred again and again the parts would be more easily irritated with each subsequent attack.

As regards treatment, it has been suggested that the men should remain off duty till the epidermis is fairly strong, and that then vaseline or some oily substance should be smeared over hands and face, and allowed to remain there while the men were at work in the joiner's shop.

As an alternative, the men might seek a job in the open air or else in another establishment.

## MEMORANDA:

### MEDICAL, SURGICAL, OBSTETRICAL, THERAPEUTICAL, PATHOLOGICAL, ETC.

#### INTRAUTERINE INFECTION OF THE FETUS IN SMALL-POX.

It is stated that children born of mothers suffering from small-pox usually show signs of the disease at birth or so soon after birth as to warrant the conclusion that they received the infection while still *in utero*. Of the former none have come under our observation; of the latter we have seen the following three cases:

No. 1.—The child was born on December 24th (evening), 1902, and the eruption of small-pox appeared on the morning of January 3rd, 1903. The attack was confluent, and the child died on January 13th. It was unvaccinated. The mother had an overlooked attack of small-pox, having sickened on December 20th, and the eruption having appeared on December 24th.

No. 2.—The child was born on June 26th, 1903, and was vaccinated the same day. The mother had sickened with a discrete attack of small-pox on June 25th, date of rash being June 26th. The child's vaccination took well, but on July 3rd the rash of severe discrete small-pox appeared, and the child died on July 15th.

No. 3.—The child was born on April 14th, 1904. The mother sickened on April 12th and died on April 16th, the dark purpuric rash of *purpura variolosa* having appeared on April 14th. The child was vaccinated on April 16th, but although this was successful the rash of discrete small-pox appeared on April 21st.

Taking the interval between infection and the appearance of the rash as the usual one of fourteen days, it follows that in the first case the child must have been infected on or about the date of onset of the mother's illness and three or four days before birth; in the second case six days before the onset in the mother and seven days before birth; and in the third case five days before the mother sickened and seven days before birth. These children were all born about full time.

Two other cases are of interest in this connexion. One was that of a woman in the seventh month of pregnancy who developed a discrete attack of small-pox. She was discharged from hospital about a month after admission. The child was born about a month after discharge, and showed no signs of having had small-pox, and in addition it was successfully vaccinated. Thus there was no immunity conferred on the child by the mother's attack. The other, a 5-months fetus born in the fourth week of the mother's illness, showed no signs of small-pox.

The five cases mentioned above include all the cases of which we know, in which variola attacked pregnant females. They seem to bear out McCombie's statement that the liability of the fetus to small-pox appears to increase directly with its age.

JAMES M. COWIE, M.D., D.P.H.,

DUNCAN FORBES, M.D., B.Sc.,

Assistants to the Medical Officer of Health, Manchester.

#### EMPHYSEMA IN A CHILD.

On February 2nd, 1904, I was called to see D. E. F., a child aged 1 year 10 months, which had been ill for three days with sickness, rapid breathing, and occasional cough.

No food had been retained, but the bowels had acted once or twice since the commencement of vomiting, and the stools were normal. The first glance at the patient gave the impression that she was suffering from pneumonia with a failing heart, and death appeared to be imminent. Temperature was subnormal; respirations about 40 per minute; the pulse 160 per minute; there was little or no movement of the ribs, though the diaphragm was moving freely, and there was marked epigastric pulsation. The face and lips were pale and cyanosed, the expression anxious, and the eyes dim. On examining the chest I found to my surprise that the lungs were everywhere fully resonant, and the cardiac dullness imperceptible over the ordinary area. Some fine

crepitations could be heard at the bases of the lungs, but no rhonchi. Strychnine gr.  $\frac{1}{16}$ , with  $\frac{1}{15}$  of brandy was at once injected hypodermically, and the child rallied somewhat, the pulse becoming fuller, while the pallor gave place to a cyanotic flush. Thinking there might be some bronchial obstruction, I then gave two teaspoonfuls of ipecacuanha wine and placed a mustard poultice over the cardiac area with a view to relieving pressure within the right ventricle. The child then coughed and vomited freely, but the respirations did not change in rate or character. The temperature was subnormal. The following treatment was ordered: Peptonized milk 1 oz. with brandy 1 drachm by rectum every two hours, and one teaspoonful of peptonized milk by the mouth every quarter of an hour unless the child slept. On the following day the condition appeared somewhat better; the pulse had improved, being only 140 per minute, but respiration continued as before and the physical signs were unchanged. The child had spoken one or twice, and nearly all the food had been retained, while she had slept a little at intervals. Food was now given more freely by the mouth, and the rectal feeding was ordered at four-hour intervals.

*Necropsy.*—On the following morning, February 4th, at about 7 a.m., the child died, and in the afternoon of the same day a necropsy was made. On removing the sternum the lungs bulged forward and were seen to be pale and typically emphysematous in appearance, a lobule of the left lung overlapping the upper part of the pericardium. Further examination showed that the emphysema involved the whole of both lungs except for a few patches of collapse. On pressure with the hand they were found to be soft, non-elastic, and slightly crepitant. There was no marked oedema at the bases, nor was there any pleuritic or pericardial effusion. The bronchi contained a little muco-purulent material, but there was no sign of tracheal obstruction, nor were the bronchial glands enlarged. The right auricle was distended and contained *ante-mortem* clot, but the ventricle was contracted and empty. The heart in all other respects appeared to be quite normal.

*REMARKS.*—So far as could be ascertained the sole cause of death appeared to be the extreme condition of emphysema from which the child was suffering, rendering impossible, as it did, any effective interchange of air in the pulmonary alveoli. There was no subcutaneous emphysema. I had attended the child on two previous occasions when it was suffering from bronchitis with blocked bronchial tubes, and on each occasion an emetic of vin. ipecac. had relieved the symptoms immediately, while during the interval the child had seemed strong and healthy. I have ventured to report this case, as it seemed a very uncommon one, and I do not remember seeing or reading of any other exactly similar. What should have caused so extreme a degree of emphysema is difficult to conjecture. The elasticity of the pulmonary tissue must doubtless have been below normal, but it can scarcely be supposed that the degree of dilatation found at death had existed for more than a few days. Idiopathic emphysema is a strange term, but there is certainly a temptation to apply it in this case.

Felixstowe.

G. J. CONFORD, B.A., M.D., B.Ch.Oxon.

#### ECTOPIC GESTATION: EARLY DIAGNOSIS: OPERATION: RECOVERY.

Mrs. A., aged 23, married early in August, 1903, was quite regular up to the middle of September. About the middle of October, at the usual time, she was unwell, but only for one day. I saw her first on October 30th, when she complained of flatulence and other symptoms of dyspepsia. On November 8th I was called to see her, because, while taking supper, she was seized with a sharp pain in the lower abdomen, and felt rather faint. I saw her half an hour after this; she was not faint at that time, but complained of a good deal of pain. The next day she said that she was unwell and had passed several clots of blood. I examined all that had passed, but could find nothing particular. I also made an examination of the patient, but as she was very sensitive I could not make out anything unusual—in fact, I could only just reach the os. She continued to pass blood for about five days. At the end of ten days she got up, feeling quite well.

On November 25th, that is to say, seventeen days after her first attack of pain, I was sent for to see her as she, whilst walking quietly with a friend, got a very sharp pain in the lower part of the belly and felt and looked very faint, and had to be driven home (less than half-a-mile). I arrived at the house before she did. On arrival she had quite got over the faintness, complained of pain, not acute, in the belly, and was able to walk upstairs and get into bed unaided. I examined her but could detect nothing, but urged that she should be examined under an anaesthetic.

The next day, November 26th, Dr. F. Carey having got her under chloroform, I was able to make a careful and thorough examination. The os was rather high up and the uterus pushed rather to the right side. A small round tumour about the size of a large walnut was felt to the left of the uterus, and quite distinct from it; it was quite movable. I diagnosed

an early ectopic gestation threatening to rupture, and urged operation as soon as it could be arranged. The next day Mrs. A. was removed to the Cottage Hospital, and the operation was performed the following morning, November 28th. I was assisted by Drs. F. and C. Carey. On opening the peritoneal cavity a small quantity of serous fluid escaped, slightly tinged with blood. I then removed the left tube, which contained an early gestation. The cyst was just on the point of giving way at the upper part; in fact, it ruptured just as I was removing it. The cyst was situated at the inner third of the left Fallopian tube, and was quite closed off from both the uterus and the outer end of the tube. The after-progress of the case was uneventful.

REMARKS.—Early diagnosis of ectopic gestation is known to be difficult. One great difficulty of this case was the fact that the patient was quite unaware that she was pregnant, as she had been regular quite up to the time of the first attack of pain. My suspicions were first roused by this attack, and I feel sure that if I had given her an anaesthetic at that time that I should have diagnosed the case eighteen days earlier than I did.

Melrose, Guernsey.

E. LAURIE ROBINSON.

#### HYPODERMIC INJECTION OF QUININE SULPHATE.

It may interest some to know that I find that ordinary quinine sulphate mixed with about one and a-half times its own weight of vaseline makes a suitable mixture to inject under the skin of the natives here to lessen the malarial index. A mass containing 15 to 20 gr. of quinine after injection takes about three and a-half months to absorb. During that time I have failed to find malarial parasites in the children on whom I have tried this mixture.

I have asked Messrs. Allen and Hanburys to make a suitable syringe, as certain difficulties arise with an ordinary syringe, especially in the tropics. But an ordinary metal hypodermic syringe will suffice.

The mixture of quinine and vaseline should be pressed into a glass tube of the same calibre as the syringe, the tube then corked and placed in boiling water for fifteen minutes; the mixture can on cooling be easily pushed into the syringe. A clamp to close down the piston of the syringe is an advantage.

The whole proceeding must be done under aseptic precautions, and the puncture closed with collodion or some similar substance. It is wise, I think, to give at the same time a dose of quinine by the mouth or an intramuscular injection of the same drug. About 103° F. is the temperature at which the unmixed vaseline I have used loses its heat most slowly, when passing from a liquid to its semisolid condition. A small amount of thickening of the subcutaneous tissue is left after absorption.

I have not at present sufficient data to say to what extent the mixture would act as a preventive of malaria in a European. The left side of the abdomen near the flank is the most suitable site for injection.

G. F. DARKER, M.R.C.S. Eng., L.R.C.P. Lond.,  
District Medical Officer, Sapeli, Southern Nigeria,  
British West Africa.

#### PUERPERAL ECLAMPSIA TWICE IN THE SAME PATIENT.

EARLY on January 18th I was called to see Mrs. A. B. When I arrived I found her in a somewhat dazed and drowsy condition, and she complained of intense headache. Her history was as follows: Just a year previously, when pregnant for the first time, she was seized with eclampsia, and labour had to be induced at the sixth month. Convalescence was prolonged, and albumen did not disappear from the urine for three months. During her present pregnancy she had lived almost altogether on milk and farinaceous foods, taking only now and then a little chicken. She had enjoyed excellent health the entire time, and felt perfectly well when going to bed the night before.

On examination I found that she was about seven months pregnant, and that labour had set in, the os being about the size of a florin. There was little or no sign of oedema, except just above the ankles, where there was slight pitting on pressure. A small quantity of dark smoky urine was drawn off with a catheter, and, on roughly heating it in a teaspoon over the flame of a candle, a dense precipitate of albumen appeared, the specimen boiling almost solid. While I was examining the patient she was seized with a very severe attack of convulsions, so I gave her a

hypodermic of morphine, and as soon as possible placed two drops of croton oil on the tongue, and prepared to give a wet pack. While the necessary things were being got ready she was again convulsed, so chloroform was administered. I found, however, that whenever the patient came from under the influence of the anaesthetic she became very restless, and was with great difficulty controlled; moreover, the attacks followed each other rapidly. Dr. Rice, for whom I had sent, now arrived, so we kept the patient fully under the chloroform, and, after some trouble, delivered her of a stillborn baby. Shortly after the placenta was expelled, and the effects of the anaesthetic had begun to pass off, she was seized with a most severe fit, the heart's action apparently ceasing—in fact, for several seconds we thought she was dead. However, she rallied, and from this on there was no repetition of the attacks. Her after-progress was all that could be desired, and the albumen disappeared at the end of three weeks.

I have to thank Dr. Rice for his kind assistance in this case, in which, although the attacks were not excessively numerous, still each seizure was a terribly severe one.

I need only add that there was no uncertainty about the nature of the previous illness. The patient's mother gave me such an accurate description of her daughter's former confinement as to leave no room for doubt regarding the genuineness of the convulsions. The case seems worth reporting because it has been stated, and I believe on good authority, that one attack of puerperal eclampsia confers future immunity.

A. E. MCCANN, L.R.C.P.I. & S.I.

Mountmellick, Queen's Co.

#### "KIDNEY COUGH."

WHILST reading Dr. Smith's interesting paper on Cough and its Significance, in the *BRITISH MEDICAL JOURNAL* of May 28th, there was one sentence which particularly arrested my attention, namely, "I know nothing about the kidneys or organs below the stomach giving rise to cough."

I should like to complete the anatomical picture, as I had a case of "kidney cough" some time ago. The patient, a female, aged 35, came to see me for pain over the lower ribs, on the left side, and cough. The pain was not severe, but the cough—which had lasted for six weeks—was one of such intensity and severity that it made a marked impression on the patient's mind, as well as on the mind of those who saw her. It hardly ever ceased night or day.

On examining the patient nothing was found wrong with lung or pleura; there was a mass in the left loin. I performed nephrectomy, and evacuated a very large primary abscess (18 oz. pus), still surrounded by kidney tissue and capsule. There was a great mass of sound kidney remaining. The sinus closed, and there was no more trouble with the cough.

The cough had its anatomical explanation in the fact that the right pneumogastric sends numerous branches to the left renal plexus.

Leeds.

J. STEWART.

#### HEREDITARY DEFORMITIES.

DR. HEY'S interesting contribution on supernumerary digits<sup>1</sup> reminds me of an infant born here a year ago—a female—minus the left hand and lower third of forearm, whose great-grandmother was born with the same deformity, the males and females of intervening generations being in every way normal.

Jura, N.B.

D. S. MACDONALD, M.B., C.M.

LIFE ON THE WEST COAST OF AFRICA.—The climate of the West Coast of Africa has always been renowned for its deadliness, and much has been written concerning it in the medical and lay press. The *Gold Coast Leader* has recently published an article by a correspondent on the life and its risks there. Special emphasis is laid on the poor condition of the dwellings in which Government officials have to reside, and the want of opportunities for relaxation and amusement. There is a considerable amount of truth in some of the statements, but after all, one must remember that the pay is high and leave is better than in other tropical colonies. Much of the disease which used to exist can now be avoided if people will follow out a careful mosquito prophylaxis based on the recent researches into the etiology of malaria, and there is not the slightest doubt that the sanitation and health of the coast is improving year by year.

<sup>1</sup> *BRITISH MEDICAL JOURNAL*, May 28th, 1904, p. 1254.



talk about the price to be given, but no offer had ever been received. Referring to the proposal to extend the present hospital buildings at Hyde Park Corner, Mr. Dent said that experience in the past showed that money could be got from the public if the necessity for help was made manifest.

Mr. R. H. C. HARRISON, who had signed the minority report, then spoke in favour of the hospital being moved from its present site, and in this he was supported by Mr. R. THORP, who had also signed the minority report.

On the resolution against the removal of the hospital being put to the vote the CHAIRMAN declared that it was carried by large majority.

The following was next moved by Mr. HEATHCOTE, and seconded by Mr. DENT:

That the present is not a favourable opportunity for appeal to the public for funds to rebuild the hospital on the present site.

Sir ISAMBARD OWEN said he thought the proposition was injudicious. The Governors had decided that they would not have the hospital removed. They must, therefore, at once face the question of rebuilding it at Hyde Park Corner, and it would not conduce to the successful raising of the necessary funds if the resolution put forward was passed. They must appeal to the public on the very first opportunity. The state of the hospital was urgent. Certain extensions were required if the work of the hospital was to be carried on properly. These could not be properly considered until the whole question of rebuilding the hospital had been thought out. He deprecated passing the resolution, because it was useless. There was no conceivable object to be gained in passing it, and it could only prejudice the Governors in their future work. The resolution was put to the meeting and lost.

The following resolutions were moved by Mr. HEATHCOTE, seconded by Mr. DENT, and carried:

That the newly-acquired site in Knightsbridge should be utilized for the immediate requirements of the hospital as soon as occasion shall serve, provided that no building be commenced and placed on the land recently acquired in Knightsbridge, unless the building is of such a kind that it will form a definite and convenient part of a new hospital, or until a complete plan of this new hospital has been carefully considered.

That it is desirable at once to negotiate with the Duke of Westminster for the purchase of the leaseholds on the terms proposed in the letters from His Grace's solicitors of March 10th, 1899, and January 6th, 1904, at the price of £33,700.

A letter was then read from Dr. ROBERT BARNES, who considered the hospital best fulfilled its purpose on the present site, and promised to subscribe £1,000 towards the improvement of the Medical School. After this announcement had been cheered, a vote of thanks to the Chairman concluded the meeting.

## MEDICAL NEWS.

THE Lord Chief Justice will preside at the annual presentation of prizes and awards to the students of St. Mary's Hospital Medical School on Wednesday, June 29th, at 4.45 p.m.

Dr. F. M. SANDWITH has joined the teaching staff at the London School of Tropical Medicine, and is lecturing there on pellagra, ankylostomiasis, and bilharziosis.

THERE is to be a jubilee celebration at Görbersdorf on July 3rd, which will be the fiftieth anniversary of the well-known sanatorium founded there by Dr. Brehmer.

SIR W. J. COLLINS will distribute the prizes to the students of the Royal Dental Hospital of London at a *conversazione* to be held at the Royal Institute Galleries, Princes' Hall, Piccadilly, at 8 p.m., on Wednesday, July 13th.

THE fourth annual South African Civil Surgeons' dinner will be held at the Hotel Cecil, London, on Tuesday next, when the chair will be taken by Mr. G. H. Makins, C.B., at 7.30 p.m. All further information can be obtained from Dr. C. Gordon Watson, 44, Welbeck Street, Cavendish Square, W.

THE total amount received as the result of the collection on June 12th by the authorities of the Metropolitan Hospital Sunday Fund at the Mansion House up to Thursday morning, June 23rd, was £31,000. As usual, the money is coming in very slowly, but it is expected that the total will not fall short of that of last year.

It has been stated in certain quarters that Dr. A. E. Boycott, Gordon Lecturer in Experimental Pathology at Guy's Hospital, has himself contracted ankylostomiasis in the course of his researches on that disease. The *Guy's Hospital Gazette* is in a position to state that there is no truth in the report, and that, "far from being a martyr to science, Dr. Boycott is in perfect health."

THE St. Petersburg Institute of Experimental Medicine has received an order from the Russian Ministry of War for the delivery of 5,000 tubes of antidyserent serum by July 1st. The serum is being prepared in the laboratory under the direction of Dr. A. Wladimiroff.

M. DOYEN, the well-known surgeon, is a candidate for a seat in the Chamber of Deputies as representative of one of the arrondissements of Paris. He has stated to an interviewer that he is not a politician and intends if elected to take an independent line, giving his attention mainly to social and hygienic questions.

WE are asked to state that a meeting will be held at the Westminster Palace Hotel at 4.30 p.m. on this day, Friday, June 24th, under the auspices of the East India Association, to discuss the salt tax in India. The chair will be taken by Mr. Jonathan Hutchinson.

A MERCURIAL COMMEMORATION.—The fortieth anniversary of the introduction of subcutaneous injections of calomel in the treatment of syphilis was celebrated recently in Italy. A Committee, consisting of Drs. Domenico Maiocchi, Ambrogio Bertarelli, and Mario Truffi, with Professor Camillo Golgi, Rector of the University of Pavia, as Honorary President, presented a gold medal to Dr. Angelo Scarenzio, to whom is attributed the invention of the method.

ROYAL STATISTICAL SOCIETY.—The seventieth annual general meeting of the Royal Statistical Society was held on June 21st, when Sir Francis S. Powell, Bart., M.P., was elected President for the ensuing year. It was announced that the subject of the essays for the Howard medal to be awarded in 1905, with £20 added, was "A Critical Inquiry into the Comparative Prevalence of Lunacy and other Mental Defects in the United Kingdom during the last fifty years."

A PROVINCIAL meeting of the Society of Medical Officers of Health will be held in the Town Hall, Newcastle-on-Tyne, on Saturday next, when a paper will be read by Dr. John J. Boyd, M.O.H. South Shields, entitled, *Observations on the Incidence of Scarlet Fever in different Districts of the same Town*. In the afternoon a visit will be paid to the Newcastle Isolation Hospital, where Dr. Armstrong will show the Newcastle excreta sterilizer.

THE annual general meeting of the Brussels Medical Graduates' Association will be held at the Trocadero, Regent Street, W., on Tuesday, July 5th, at 6.30 p.m. At 7 p.m. for 7.30 p.m. the members and their guests will dine together, Dr. Major Greenwood, the President, being in the chair. Among the guests expected to be present are Sir Hugh Beever, Bart., Sir Isambard Owen, M.D., and Dr. F. de Havilland Hall. Any Brussels medical graduate wishing to be present is requested to communicate with the Honorary Secretary, Dr. Edwards, Camberwell House, Camberwell, S.E.

THE annual conference of delegates of charity organization societies was held last week in Kendal. The principal business on the first day was a discussion of the paper by Dr. W. Rushton Parker on consumption. He urged that in order to abolish tuberculosis it was necessary to attend to general sanitation, to isolate cases in infectious stages in refuges and sanatoria, to establish notification, to suppress spitting, and to prevent the consumption of tuberculous meat and milk. Dr. Paget Tomlinson dwelt on the necessity of sanatoria for consumptives in the early stage, and of isolation homes for advanced cases. He also advocated home visitation by members of charity organization societies. Mr. Kailton spoke on the necessity for providing healthy occupation for convalescents.

THE annual meeting of the State Children's Aid Association was held at 13, Carlton House Terrace, on June 21st. The Earl of Crewe, who presided, said that while there was a general desire that every child should have an equal chance in life those who were brought up in workhouses were handicapped. It was estimated that of the 61,000 children dependant in the State 22,000 were in rate-supported institutions; the Association favours the system of scattered homes and had done much useful work in securing the adoption of the principles by Boards of Guardians. Mr. R. B. Haldane, M.P., also insisted upon the advantages of homes in place of large institutions for Poor-law children, and Mrs. S. A. Barnett, Honorary Secretary, dwelt on the desirability of establishing separate courts of justice for children such as were established many years ago in Massachusetts and subsequently in other parts of the United States.

outside Oxford, may, on production of cards of membership, obtain return tickets at a single fare and a quarter (minimum charge 1s.) from Oxford to London or to any station not more than fifty miles distant to which through bookings are in operation; these tickets will be available to return on the same or following day. Members availing themselves of this privilege should use the original return ticket for the first journey to and the last journey from Oxford. The member's ticket, which is obtained at the Reception Room when registering attendance, will enable members to get the reduced fares from Oxford to London and to places within the fifty-mile radius for any intermediate journeyings.

## ASSOCIATION NOTICES.

### COUNCIL.

#### NOTICE OF MEETING.

A MEETING of the Council will be held in the Council Room of the Association, at 429, Strand (corner of Agar Street), London, on Wednesday, the 6th day of July next, at 2 o'clock in the afternoon.

June, 1904.

GUY ELLISTON, *General Secretary.*

#### ELECTION OF MEMBERS.

ANY candidate for election should forward his application upon a form, which will be furnished by the General Secretary of the Association, 429, Strand. Applications for membership should be sent to the General Secretary not less than thirty-five days prior to the date of a meeting of the Council.

### LIBRARY OF THE BRITISH MEDICAL ASSOCIATION.

MEMBERS are reminded that the Library and Writing Rooms of the Association are fitted up for the accommodation of the members in commodious apartments, at the office of the Association, 429, Strand. The rooms are open from 10 a.m. to 5 p.m. Members can have their letters addressed to them at the office.

GUY ELLISTON, *General Secretary.*

#### BRANCH MEETINGS TO BE HELD.

**BIRMINGHAM BRANCH: CENTRAL DIVISION.**—Notice is hereby given that a general meeting will be held at the Medical Institute, Edmund Street, at 4 p.m. on Thursday, July 14th. Business: (1) The consideration of a suggested new rule for Division. (2) To consider and instruct the Representative upon various reports of the Medico-Political Committee. (3) General. Members are particularly requested to make a note of this meeting, as individual notices will not be sent out on this occasion.—E. D. KIRBY, 106, Hagley Road, Birmingham, *Honorary Secretary.*

**BIRMINGHAM BRANCH: COVENTRY AND TAMWORTH AND NUNEATON DIVISIONS.**—The joint annual meeting of these Divisions will be held at the Coventry and Warwickshire Hospital on Wednesday, June 23rd, at 3 p.m. Agenda: 1. Election of a Representative for the Annual Representative Meeting. 2. Instructions to be given to such Representative on the matters arising at the Representative Meeting. (These matters are fully set out in the SUPPLEMENT to the BRITISH MEDICAL JOURNAL of May 7th; members will probably find it a convenience to bring that SUPPLEMENT with them.)—F. L. HARMAN BROWN, Clive House, Warwick Road, Coventry, *Honorary Secretary.*

**BIRMINGHAM BRANCH: DUDLEY DIVISION.**—The annual meeting of this Division will be held in the Town Hall, Dudley, on Thursday, June 30th, at 3 p.m.—M. A. MESSITER, Cappoly, Dudley, *Honorary Secretary.*

**BIRMINGHAM BRANCH: WEST BROMWICH DIVISION.**—The annual meeting of this Division will be held in the Board Room of the West Bromwich District Hospital on Wednesday, June 23rd, at 4 p.m. Business: To elect officers. 1. Two Representatives on Branch Council. 2. Ordinary members of Executive Committee. 3. Representative in Representative Meetings of the Association. To receive report from Executive Committee. To consider the business of Annual Representative meeting. To consider memorandum from Exeter Division. Other business.—H. B. W. PLUMMER, 54, Birmingham Road, West Bromwich, *Honorary Secretary.*

**BORDER COUNTIES BRANCH.**—The annual meeting of this Branch will be held on Thursday, June 30th, in the County Hotel, Carlisle, at 3 p.m. Business: 1. Reports of election of new officers. 2. Election of six members of Council. 3. President's address.—FRANCIS R. HILL, 62, Warwick Road, Carlisle, *Honorary Secretary.*

**CAMBRIDGE AND HUNTINGDON BRANCH.**—The annual meeting of this Branch will be held at Cambridge on Thursday, June 30th. Members desiring to make communications should write to the Honorary Secretary as soon as possible.—F. E. APTHORPE WEBB, 25, Newmarket Road, Cambridge, *Honorary Secretary.*

**DORSET AND WEST HANTS BRANCH: BOURNEMOUTH DIVISION.**—A meeting of this Division will be held at the Medical Society's rooms, Shaftesbury Hall Chambers, Bournemouth, on Monday, July 4th, at 3.15 p.m.—Agenda: Cases, if any. Instructions to delegate of Division at Oxford meeting. Dr. Snow will open a discussion on Obesity. Members having papers to read or cases to communicate are requested to notify the Honorary Secretary as soon as possible.—C. H. WATTS PARKINSON, St. Margarets, Wimborne, *Honorary Secretary.*

**EDINBURGH BRANCH: NORTH-WEST EDINBURGH DIVISION.**—The annual meeting of the Division will be held on Tuesday, June 28th, at 4.15 p.m., in the Hall of the Royal College of Physicians, Queen Street. Business: (1) Minutes of previous meeting. (2) Election of officers and members of Executive Committee. (3) Election of two Representatives of the Division to the Branch Council. (4) Election of Representatives of the Division at Representative Meetings of the Association. (5) Annual Report of the Executive Committee. (6) To consider the business of the Annual Representative Meeting at Oxford. (Notices of motions have been published in the BRITISH MEDICAL JOURNAL SUPPLEMENT of May 7th.) (7) To consider the following questions referred to the Division for its opinion thereon: (a) Whether it is desirable that the medical witnesses engaged on each side in legal cases should meet in consultation (see SUPPLEMENT to BRITISH MEDICAL JOURNAL, March 19th, 1904) (b) The question of the advertising of medical practitioners in connexion with hydropathic establishments (loc. cit.). (c) Shall medical defence be undertaken by the Association? (In connexion with this question, the Honorary Secretary would feel much obliged if members who approve of this scheme would fill in and return to him immediately the form of agreement enclosed with the Medical Defence circular. Those disapproving of the scheme might advise the Secretary before the date of meeting.) (8) To consider a communication from the Edinburgh Southern Division regarding the administration and regulations for admission to the out-patient departments of the Royal Infirmary. (9) Any other competent business.—T. F. S. CAVERHILL, 6, Manor Place, Edinburgh, *Honorary Secretary.*

**LANCASHIRE AND CHESHIRE BRANCH.**—Preliminary notice. The annual meeting of this Branch will be held in Blackburn on the afternoon of Thursday, June 30th. The Honorary Secretary will be pleased to hear from any member desirous of reading papers, etc.—T. ARTHUR HELME, 3, St. Peter's Square, Manchester, *Honorary Secretary.*

**LANCASHIRE AND CHESHIRE BRANCH: MANCHESTER AND LIVERPOOL DISTRICT.**—*Oxford Meeting:* Arrangements are now being completed with the Great Western Railway Company to attach a special car to the 12 o'clock noon train for Oxford on Monday, July 25th, from London Road, Manchester. Members will leave Liverpool Great Western about 11.30 a.m. to join the party at Crewe about 1 p.m., due at Oxford at 5.45. The car will be attached to the train leaving Oxford at 6.12 p.m. on Saturday, picking up members at Leamington or Warwick who have availed themselves of the invitation by the Corporation of Leamington and the Countess of Warwick, as mentioned on pages 168 and 169 of the SUPPLEMENT to the BRITISH MEDICAL JOURNAL of June 11th. Members intending to join this party should send word as early as possible to Dr. Bagley, 229, Clowes Street, Manchester, S.E., so that he may know how many will be going.

**METROPOLITAN COUNTIES BRANCH.**—The annual meeting of this Branch will be held at the Hotel Cecil on Tuesday, June 28th, at 6 p.m. The annual dinner (8s. 6d., exclusive of wine) will follow the meeting at 7.15 for 7.30 p.m., Dr. H. Kadcliffe Crocker, President, in the chair.—G. KOWELL, 6, Cavendish Place, W.; F. J. SMITH, M.D., 138, Harley Street, W., *Honorary Secretaries.*

**NORTH LANCASHIRE AND SOUTH WESTMORLAND BRANCH.**—The annual meeting of this Branch will take place at the County Hotel, Ulverston, on June 29th, at 3 p.m. There will also be a joint meeting of the Furness and Kendal Divisions to elect their Representative. Members willing to show cases, specimens, etc., are requested to communicate as soon as possible with the Honorary Secretary, A. S. BAKLING, High Street, Lancaster.

**NORTH WALES AND SHROPSHIRE BRANCH.**—The annual meeting will be held at Shrewsbury on or about the 7th day of July. Members having papers to read or cases to communicate are requested to notify either of the Secretaries on or before June 25th.—W. JONES MORRIS, Portmadoc; H. JONES ROBERTS, Penygroes; H. H. B. MACLEOD, Clive House, Shrewsbury, *Honorary Secretaries.*

**SOUTHERN BRANCH.**—The annual meeting of this Branch will be held at the South Western Hotel, Southampton, on Thursday, July 7th. The President kindly invites the members to luncheon at the hotel at 1 p.m.; the general meeting will be held at 2 p.m. The following resolutions will be moved from the chair:—(1) That each candidate for election to the Association by the Council of the Southern Branch (excepting officers of the army, or navy, or Indian Medical Service on the Active List) shall furnish a certificate from two members of the Association, to whom he is personally known. (2) That a donation of 5 guineas be made to the Epsom College. N.B.—This donation will entitle the Branch to vote at the next election of pensioners and foundation scholars. Dr. Ward Cousins will move: "That, as the Midwives Act of 1902 contains no provision for the payment of medical practitioners, the members of the Southern Branch hope that the Council of the Association will take steps to promote an amendment of the Act for the purpose of providing fair remuneration for medical men called to assist midwives in cases of danger and difficulty." Papers will be read as follows: Mr. Child: "Three Cases of Abdominal Hysterectomy." Dr. Ward Cousins: "The Treatment of Post-nasal Adenoids." Dr. Purvis: "Remarks on Three Recent Cases of Malignant Disease of the Tongue." An address will be delivered by Mr. J. F. Bullar, M.B., President. After the address visits will be paid to places of interest in the town and neighbourhood. Tea will be served at the hotel from 4.30 to 6. Members intending to be present at luncheon are requested to communicate with Dr. Wade, 28, Carlton Crescent, Southampton, not later than July 6th.—H. J. MANNING, Laverstock House, Salisbury, *Honorary Secretary and Treasurer.*



**ULSTER BRANCH.**—The annual meeting of this Branch will be held in Belfast on Wednesday, July 20th. Any member having any communication to make or any business to bring before the meeting should kindly inform me on or before July 12th. Nominations for the offices of President, Representatives on the Council of the Association (two when combined with Connaught Branch), Honorary Treasurer, and Honorary Secretary should reach me not later than June 30th.—WILLIAM CALWELL, M.D., 1, College Square North, Belfast, Honorary Secretary.

**WEST SOMERSET BRANCH.**—The annual meeting of this Branch will be held at the Crown Hotel, South Petherton, on Tuesday, June 28th, at 12.30 p.m., under the presidency of Mr. A. W. Sinclair. Agenda: Minutes of last meeting. Annual report of Council. Treasurer's report. Election of President-elect. Election of other officers. Election of Ethical Committee. Ethical case: Report of Committee on case recently before them. Resolution: The following will be proposed: "That members of the Council attending ordinary meeting of the Council at Taunton shall receive their second-class return railway fare." President's address on Neurasthenia. Luncheon will be served at the Crown Hotel at 1.30 p.m.—W. B. WANCEWORTH, Sussex Lodge, Taunton, Honorary Secretary.

## SPECIAL CORRESPONDENCE.

### VIENNA.

*Statistics as to Small-pox and Diphtheria.—The Fight against Tuberculosis.—Foundation of New Clinics.*

STATISTICS are now available in regard to the proportion of morbidity and mortality in the part of Lower Austria under the jurisdiction of the General Health Council. Not a single case of hydrophobia, small-pox, or anthrax has come to the knowledge of the medical officers in 1903, a record of immunity of which there has been no previous example in the last ten years. Small-pox is practically stamped out throughout the greater part of Austria, an area nearly of the size of the United Kingdom. Only in some districts bordering on the Balkan States and Russia, a case is now and then reported, but an outbreak is quickly suppressed. This result is to be attributed to the enforcement of compulsory vaccination; children must bring a certificate of revaccination before they are admitted to any school, and it must be remembered that school attendance is compulsory. Moreover, every man entering the army for his period of compulsory service is revaccinated. The result is, that amongst the younger members of the medical profession there are very few if any, who have seen a case of small-pox eruption, except in the pictures of an atlas of dermatology. The report of the Council, however, shows a very high prevalence of measles and whooping-cough, especially in Vienna. The present epidemic of measles is of a mild character, though likely to lead to complications of the ear and joints. In regard to whooping-cough, experiments on a large scale have been conducted by Professor Monti in the Poliklinik, with the object of shortening and mitigating the disease. The children are brought into rooms where the air is charged with special gaseous substances. The results are said to be encouraging. Diphtheria is no longer the dread of medical practitioners, thanks to Behring; whilst the number of cases is not much smaller than in the corresponding years of the previous decades (1880-90, 1890-1900), the mortality is markedly lower—lower even than two years ago (10.75 per cent. to 14 per cent.). It must be kept in mind that these reports represent chiefly the results of private practice in rural and county districts, where parental carelessness makes it difficult to adopt stringent measures enforced in hospitals. In the large hospitals the mortality from diphtheria is even lower than that shown by the figures just quoted.

An interesting chapter in the report deals with the question of fighting tuberculosis. As yet there are only a few sanatoriums in which the open-air treatment is carried on, and they are in need of funds. But a great deal of propaganda work has been done by means of handbills, posters, lectures, and pamphlets, in which the nature of the disease, the means of prevention, and the chief lines of treatment are set forth in plain language. In a number of trades in which dusty material has to be handled or much dust is produced (iron-grinders, builders, scavengers, street-sweepers), instructions have been given that dust should be as far as possible laid with water. Spitting has been forbidden in public streets and buildings, and a number of towns, especially the numerous health resorts, have issued laws against ladies using gowns with trails.

The foundation stone of the new clinics, which are to take the place of the present antiquated General Hospital, was laid

last week by the Emperor Francis Joseph in the presence of a brilliant gathering of scientists and Government functionaries. The Lord Mayor of Vienna, the Rector Magnificus of the University of Vienna, the Prime Minister and his colleagues, the chief magistrates, along with the Archbishop and Grand Rabbi of Vienna, witnessed the scene. An address was presented to His Majesty by the Director of the present hospital, to which His Majesty graciously replied that it was a pleasant duty of the wealthy to help suffering mankind. The hospital to be erected will be the largest of its kind in the world, providing ample room for all branches of the art of healing, together with laboratories and other institutions of scientific research. The entire teaching staff of the Medical Faculty in this city will find there accommodation for its needs.

### MANCHESTER.

*A Memorial Portrait of the late Dr. Sam. Woodcock.—Neglect of Children.—Clearing the Site for the Infirmary.*

FOR many years the late Dr. Sam. Woodcock was honorary superintendent of a mission in the district wherein his practice lay. Sir James Hoy recently unveiled a memorial portrait which is to be hung in the mission hall which was the scene of his Sunday labours on behalf of the youth of the district. He preached there every Sunday night for years, he managed all its affairs, and smoothed away all its difficulties. He was a grand man, a true friend, and a shining example of what a good citizen ought to be. Sir James Hoy recalled his gifts as a witty conversationalist and as a ready public speaker, his unfailing urbanity, his kindness of manner, his robust manliness, and his love of work, political and social, which counted for the common good. Dr. Woodcock's example stood out, he said, with singular brilliance in Manchester life as that of a busy professional man who yet found time ungrudgingly to give much service to his fellow-men. He was actuated by a deep-seated love of the old straight Puritan life, the principles of which he endeavoured to work out and develop in a variety of ways for the common good. He hated humbug, pretentiousness, and flunkeyism; he had a real love for common folk and a continuing sympathy with them in their hard struggles. In his intercourse with his fellow-men he showed how a close study of the literature of Hood and Waugh and the utterances of John Bright might shape and develop the keenest human sympathies and the surest bonds of a common brotherhood.

At the annual meeting of the Manchester and Salford Branch of the National Society for the Prevention of Cruelty to Children, which was held on June 17th, it was stated that the inspectors do not merely enter a house and, if they find ill treatment and neglect, warn the parents or guardians, but they keep on paying visits, either until there has been an improvement, or until the parents have been prosecuted and some provision made for the children. During last year the officers of the Society investigated 1,711 cases, affecting the welfare of 4,796 children, 2,399 of whom were insured for a total of £14,000. There were 1,607 instances of neglect. In 1,443 cases warnings were given. There were 117 prosecutions, and of the 138 persons prosecuted 112 were sent to prison and four were fined. The inspectors come across a great many cases due to poverty. "The principal causes of cruelty and neglect of children other than drink—which still remains responsible for nearly all cases in which the Society's supervision is required—are ignorance and laziness. It is in dealing with this class of cases that the Society shows the best results."

The contract for clearing the site of Stanley Grove for the erection of the new infirmary has been let to a contractor, and workmen are busy demolishing the houses and putting everything in readiness for the builders when the plans have been passed—which will necessarily be a long and anxious task—and other arrangements completed.

### LIVERPOOL.

*The Consumption Hospital and the Delamere Sanatorium.—The Isolation of Measles and Whooping-cough.—Epileptic Home, Maghull.—Health Report for Bootle.*

ON the occasion of the annual meeting of the Hospital for Consumption and the Delamere Sanatorium a visit was paid to the latter institution by the Lord Mayor and a large party of subscribers and others, who were shown through the wards

Later he joined his father in practice at Reading, becoming medical officer of the Reading Dispensary and of the St. Giles's district of the Reading Union. He was a member of the Reading Division of the Oxford and Reading Branch of the British Medical Association, and at the time of his death one of the oldest members of the Reading Pathological Society. Both as a man and as a medical practitioner he enjoyed the highest esteem of all who knew him, and eloquent testimony to the regard felt for him was afforded by the attendance at the funeral; it comprised numbers of the poorer classes, who rightly feel that they have lost in Selby Little an untiring, kindly friend. Mr. Little was married and is survived by his wife, but left no family.

M. JEAN DAVID, of Montpellier, the oldest member of the medical profession in France, died last week in the 104th year of his age. He was born at Murviel-les-Montpellier on February 3rd, 1801, qualified as an *officier de santé* in 1824, and up to a very advanced age he practised his profession at Grubels near Montpellier. He retired in 1892. Up to that time he had led the hard life of a country doctor, making his rounds, winter and summer, on horseback. His sphere of practice covered a very extensive and mountainous region. He was for many years Mayor of his commune. He was a man of vigorous constitution and very temperate habits. During the last few years of his life he suffered from blindness, caused by cataract, but his mind remained perfectly clear to the end. M. David was the author of an essay on the efficaciousness of emetics in whooping-cough, and had a great local reputation for his special skill in the treatment of malignant pustule.

Dr. L. A. JOSEPH MICHON, who died recently, was for many years physician to several members of the Orleans family, with the heads of which he was on terms of close intimacy. When Marshal Macmahon was President of the French Republic, he was Prefect of the Loiret and the Puy-de-Dôme Departments. He took his medical degree at the Paris Faculty in 1860, his thesis being entitled *Unpublished Documents relative to the Great Plague of 1348*. Dr. Michon was also a Doctor of Letters, a degree for which he presented, in 1859, a French thesis entitled *Des Céréales sous les Romains; et une Latin one entitled Quid Lybiae geographiae auctore Plinio Romani contulerint*. Dr. Joseph Michon was a son of Dr. Louis Marie Michon, Surgeon to the Paris hospitals, and a Member of the Académie de Médecine, who died in 1866.

Baron ANTONIO EVARISTO D'ORNELLAS, sometime Minister Plenipotentiary of Portugal in France who died recently, was a Doctor of Medicine of Paris and Oporto. He took his degree at Paris in 1854, the subject of his inaugural thesis being the morbid anatomy and treatment of the fibrous polypi of the base of the skull known as naso-pharyngeal. He was also the author of a monograph on the physiological action of emetine which was published at Paris in 1874 and of a paper on vomiting which appeared in the *Bulletin Thérapeutique* (1873).

## UNIVERSITIES AND COLLEGES.

### UNIVERSITY OF OXFORD.

*Examiner in Medicine.*—George A. Gibson, M.D. Edin., has been appointed an examiner in Medicine.

*Representative on the General Medical Council.*—The announcement, made on the authority of the University Gazette, of the election of a representative on the General Medical Council was erroneous. No election has taken place.

*Degrees.*—In a Congregation held on Thursday, June 16th, the following degrees were conferred: Doctors of Medicine: Gustave Isidore Schorstein, M.A., B.M. Christ Church, F.R.C.P., and Arthur Edwin Boycott, M.A., M.B., Brasenose College.

The following candidates have passed the First M.B. Examination in the subjects indicated:

*Organic Chemistry.*—M. Bates, St. John's College; S. Nockolds, Keble College; W. W. Wells, Merton College.

*Materia Medica and Pharmacy.*—M. Baines, Exeter College; M. Bates, St. John's College; C. N. Binney, Corpus Christi College; L. C. Bristocke, Jesus College; A. W. Burnyeat, Queen's College; H. G. Butterfield, Wadham College; R. Evans, Jesus College; N. Flower, Exeter College; P. H. C. Fowell, St. John's College; M. H. Nash, Exeter College; S. Nockolds, Keble College; E. A. Ramsden, New College; A. H. Savage, New College; P. T. Spencer-Phillips, New College; B. W. Stone, Brasenose College.

*Anatomy and Physiology.*—H. H. Carleton, Keble College; E. A. Cockayne, Balliol College; E. P. Cumberbatch, Keble College; M. Davidson, Trinity College; M. W. Flack, Keble College; N. Flower, Exeter College; J. E. Hornsey, Wadham College; G. R. Hughes, Exeter College; S. E. Whitnall, Magdalen College; W. C. Wigan, St. John's College; A. P. Yorge, Exeter College.

The following candidates have passed the Second M.B. Examination in the subjects indicated:

*Pathology.*—P. E. H. Adams, Exeter College; O. E. Berkeley-Hill, Trinity College; H. W. Brodribb, University College; E. Burstall, Trinity College; H. R. Dean, New College; P. J. Dear, non-collegiate; J. Freeman, University College; J. H. Hebb, St. John's College; J. G. Priestley, Christ Church; R. H. Sankey, Christ Church; H. G. F. Spurrell, Merton College.

### UNIVERSITY OF CAMBRIDGE.

The following candidates have passed the First Examination for medical and surgical degrees in the subjects indicated:

*Part I. Chemistry and Physics.*—C. W. Archer, Trin.; G. R. Batterbury, Cai.; R. L. Barker, Cai.; J. P. Benskin, Christ's; L. Bromley, Cai.; J. S. Burn, Trin.; A. S. Cane, King's; H. G. P. Castellain, M.A., Trin.; H. F. Comyn, King's; C. H. Cox, Jes.; J. H. Crofton, Pemb.; C. C. Dobell, Trin.; E. A. Dyson, Jes.; A. Feiling, Pemb.; J. E. Ferrar, Sid. Suss.; R. H. W. Fisher, Emm.; R. Gamlin, King's; R. W. B. Gibson, Jes.; P. K. Gilroy, H. Selw.; S. Gordon, Pemb.; A. R. Hargreaves, Trin.; T. W. Haward, King's; C. B. Hawthorne, Cla.; G. Holmes, Cai.; B. Hughes, B.A., H. Selw.; J. M. Jarvie, Emm.; A. P. Methuen, Trin.; G. W. Mitchell, Cla.; P. Newton, Cla.; T. E. Osmond, Emm.; G. M. Parker, Emm.; W. M. Penny, Jes.; H. F. Percival, Trin.; F. H. Robinson, Queens'; L. M. Routh, Cai.; E. N. Russell, Trin.; J. H. Ryffel, M.A., Pet.; J. G. Sauer, Cai.; M. R. Sawhny, Down.; H. Scott, Trin.; R. M. R. Thursfield, H. Selw.; R. H. Vercoe, Joh.; P. B. Wallis, Pemb.; E. P. W. Wedd, Cai.; J. M. Weddell, Christ's; M. M. Woods, Cla.

*Part II. Elementary Biology.*—J. W. Adams, Cai.; F. S. Adams, Christ's; G. C. Alderson, Cai.; W. B. G. Angus, Christ's; C. W. Archer, Trin.; H. L. Attwater, Pemb.; H. J. Baldwin, B.A., Emm.; R. L. Barker, Cai.; G. R. Batterbury, Cai.; J. P. Benskin, Christ's; A. S. Cane, King's; H. G. P. Castellain, M.A., Trin.; F. G. Cawston, Cai.; H. F. Comyn, King's; C. H. Cox, Jes.; J. H. Crofton, Pemb.; J. H. Cumming, Pemb.; C. C. Dobell, Trin.; C. A. Dottridge, Cla.; A. Feiling, Pemb.; R. H. W. Fisher, Emm.; R. Fisher, Sid. Suss.; R. Gamlin, King's; G. Gamlin, Pemb.; W. Gillison, Pet.; P. K. Gilroy, H. Selw.; S. Gordon, Pemb.; A. H. Gosse, Cai.; C. C. Harrison, Cai.; R. H. P. Hick, Christ's; R. F. Higgins, Cai.; S. J. Higgins, Cai.; B. Hughes, B.A., H. Selw.; J. M. Jarvie, Emm.; J. S. Jobson, Sid. Suss.; H. D. Lander, Cai.; A. C. C. Lawrence, Trin.; J. C. Marklove, Cai.; C. C. Messiter, Cai.; B. L. Miles, Pemb.; G. W. Mitchell, Cla.; H. G. Monteith, Pemb.; V. H. Mottram, Trin.; C. J. Nicholson, Cai.; H. M. D. Nicoll, Cai.; T. E. Osmond, Emm.; G. M. Parker, Emm.; F. H. Robinson, Queens'; E. N. Russell, Trin.; J. H. Ryffel, M.A., Pet.; J. G. Sauer, Cai.; M. R. Sawhny, Down.; H. Scott, Trin.; A. S. Seabrooke, Christ's; I. Singh, Pemb.; R. M. R. Thursfield, H. Selw.; R. H. Vicary, Cai.; E. T. Willans, Emm.

The following candidates have passed the Second Examination for medical and surgical degrees in the subjects indicated:

*Human Anatomy and Physiology.*—P. H. Bahr, B.A., Trin.; G. G. Butler, B.A., Emm.; R. N. Chopra, Down.; E. B. Clayton, B.A., Cai.; G. G. Collett, Trin.; A. F. Comyn, B.A., Pemb.; A. J. W. Cunningham, Trin.; H. E. T. Dawes, B.A., Joh.; G. W. Dryland, B.A., Cai.; H. G. Earle, Down.; T. G. Elger, Cai.; D. Embleton, B.A., Christ's; G. B. Fleming, B.A., King's; C. L. Forde, B.A., Cla.; T. R. Glynn, B.A., Cla.; J. W. Grice, B.A., King's; R. E. V. Hale, B.A., Cai.; P. Hamill, Trin.; G. A. F. Heyworth, B.A., Trin.; F. H. Holl, Trin.; W. D. Hopkins, Trin.; A. F. Jackson, Pet.; W. M. Jeffreys, B.A., Trin.; R. P. Lamb, B.A., Trin.; K. A. Lees, B.A., King's; S. G. Luker, B.A., Pemb.; B. K. Nutman, B.A., Jes.; M. W. B. Oliver, B.A., Trin.; J. H. Pratt, B.A., Trin.; C. E. Redman, B.A., Pemb.; A. C. H. Rothera, B.A., Emm.; C. E. F. Salt, B.A., Pemb.; H. A. Smith, B.A., H. Selw.; H. H. Taylor, B.A., Pemb.; C. H. Treadgold, B.A., Cla.; P. J. Verrall, Trin.; T. N. Wood, B.A., Pemb.; O. K. Wright, B.A., Christ's.

The following candidates have passed the Third Examination for medical and surgical degrees in the subjects indicated:

*Part I. Pharmacology and General Pathology.*—R. A. Clapham, B.A., Emm.; S. W. Cole, M.A., Trin.; A. I. Cooke, B.A., Cai.; W. D. Coplestone, B.A., Jes.; A. W. D. Covenand, B.A., Trin.; G. W. Craig, B.A., Emm.; H. P. Crampton, B.A., Cla.; W. L. Cripps, B.A., Trin.; L. G. Davies, B.A., Trin.; G. B. Davis, M.A., Corp. Chr.; A. N. Dixon, Down.; L. Dukes, B.A., Trin.; A. C. D. Firth, B.A., Trin.; D. H. Fraser, B.A., Cai.; H. P. Gibb, B.A., Sid. Suss.; G. F. Greenwood, B.A., Sid. Suss.; C. F. Hadfield, M.A., Trin.; E. Harrison, B.A., Trin.; N. G. Harry, B.A., Jes.; E. C. Hughes, B.A., Cla.; R. O. Lee, B.A., Emm.; W. B. Marshall, B.A., Joh.; T. M. Neatby, B.A., Joh.; W. H. Newton, B.A., Emm.; R. G. Nothwanger, M.A., Joh.; S. A. Owen, B.A., Trin.; G. G. Packe, B.A., Trin.; C. H. W. Page, M.A., Corp. Chr.; P. N. Pantan, B.A., Trin.; D. G. Pearson, B.A., Pemb.; C. T. M. Plowright, B.A., Joh.; R. H. Robbins, B.A., Trin.; O. L. Scarborough, B.A., Joh.; F. Shingleton-Smith, King's; H. F. Skrimshire, B.A., Jes.; W. H. R. Sutton, B.A., Down.; C. B. Ticehurst, B.A., Joh.; W. S. Tresawna, B.A., Sid. Suss.; S. L. Walker, B.A., Sid. Suss.; B. Wallis, B.A., Trin.; H. P. Weaver, B.A., Trin.; H. W. Wiltshire, B.A., Cla.; L. Worrall, B.A., Christ's.

*Prize.*—The Raymond Horton-Smith Prize, for the best M.D. Thesis of the year, is awarded to Dr. F. A. Bainbridge, M.A., Trinity; Dr. B. N. Tebbis, Queens', receives honourable mention.

*Surgery.*—Dr. H. B. Roderick, M.A. Emmanuel, has been appointed Demonstrator of Surgery to Professor Howard Marsh.

*Botany.*—An election to the Frank Smart Studentship in Botany, value £100 a year, will take place in July. It is open to graduates of the University of less than fourteen terms' standing. Application is to be made to the Vice-Chancellor by July 13th.

*Tropical Medicine.*—The examination for the University Diploma in Tropical Medicine and Hygiene will take place on August 9th and 10th in Cambridge, and on August 11th in the Dreadnought Seamen's Hospital, Greenwich.

*Degrees.*—On June 18th the following degrees were conferred: M.D.: W. H. W. Atlee, St. John's. D.Sc.: Professor C. S. Sherrington, F.R.S., Caius. M.B.: C. Stiebel, Trinity Hall. B.C.: C. A. W. Pope, Trinity. On June 16th the following degrees were conferred: M.D.: G. R. Slade, Trinity; E. E. Prest, St. John's. M.B.: H. F. Horne, King's; A. S. Bradley, Caius; E. Gardner, Caius; E. T. Harris, Christ's; G. A. Wright, Christ's. B.C.: H. F. Horne, King's; H. Rischbieth, Trinity; A. E. Barclay, Christ's; J. Lambert, Downing; H. L. Wilson, Hosi. Selwyn.

UNIVERSITY OF ABERDEEN.  
UNIVERSITY COURT.*The late Sir William Henderson.*

BEFORE the ordinary business of the University Court, on June 14th, Principal Lang made fitting reference to the death of Sir William Henderson, one of the most useful and honoured citizens of Aberdeen. He was connected with and was the promoter of all the benevolent and useful institutions in the city. The University knew him as one of her honorary graduates, and this distinction had been conferred on him on account of his services, the width of his sympathies, and his interest in all matters connected with the University. He was a liberal contributor to the extensions of the buildings which were now proceeding towards completion. Day by day he had gone with the Principal to various friends in the city, and by representations and by the assurance of his co-operation very large gifts were secured for the University. Sir William Henderson was also the chief promoter of the scheme to commemorate the jubilee of the late Queen Victoria in 1887 by the erection of the surgical block in the Royal Infirmary—a matter which he carried to a most successful issue, and in this regard his great services were commemorated by the ward which is named after him. The Principal then moved that the University Court enter on its minutes an expression of its deep regret on account of the death of Sir William Henderson, an honorary graduate of the University, whose interest in the welfare and progress of the University was expressed in munificent gifts and in active exertions on its behalf. The Court will offer its deepest sympathy to the bereaved family. The motion was unanimously passed.

*Pharmacy Degree Regulations.*

The proposed regulations for a degree in Pharmacy B.Sc. (Pharm.) were formally approved.

*Education in Forestry.*

A number of resolutions adopted at the Conference on Education in Forestry, held in Edinburgh on May 27th, were submitted by Professor Traill, who represented the University on that occasion. These resolutions had to do mainly with the question of what part the Universities were to play in Forestry education and the granting of degrees on this subject. It was decided to record the resolutions in the minutes.

*Botany Examinership.*

Mr. Robert J. Harvey Gibson, M.A. Aberd., Professor of Botany in the University of Liverpool, was appointed additional examiner in botany.

## UNIVERSITY COLLEGE, CARDIFF.

ON Monday night last, Principal Griffiths received the distinguished honour of being elected an honorary Fellow of his old College, Sidney Sussex, Cambridge. Principal Griffiths is the first honorary Fellow of this College to be elected for three hundred years, and the honour he has received is the highest that can be conferred upon any member. Welshmen have reason to be proud of their countryman, who is probably the most distinguished scientist whom Wales has ever produced, and who by his academic status and services to science is entitled to rank with those whose names are universally known in the realms of science. Past and present students must feel proud of being connected with a College presided over by a man upon whom his Alma Mater and learned societies confer their highest distinctions.

PUBLIC HEALTH  
AND  
POOR-LAW MEDICAL SERVICES.

## HEALTH OF ENGLISH TOWNS.

IN seventy-six of the largest English towns, including London, 8,595 births and 4,029 deaths were registered during the week ending Saturday last, June 18th. The annual rate of mortality in these towns, which had been 15.4, 14.6, and 14.2 per 1,000 in the three preceding weeks, further declined last week to 13.8 per 1,000. The rates in the several towns ranged from 1.7 in Handsworth (Staffs.), 4.5 in Ipswich, 6.5 in Southampton, 6.6 in Leyton, 6.8 in Bootle, 6.9 in Tottenham, 7.0 in King's Norton, and 7.5 in Willesden and in Walthamstow, to 17.9 in Hanley, 18.1 in Preston, 18.6 in Leeds, 18.7 in Liverpool, 20.0 in Manchester, 20.6 in St. Helens, 22.6 in Tynemouth, and 23.7 in Stockport. In London the rate of mortality was 12.8 per 1,000, while it averaged 14.2 per 1,000 in the seventy-five other large towns. The mean death-rate from the principal infectious diseases in the seventy-six large towns was 1.5 per 1,000; in London also this death-rate was equal to 1.5 per 1,000, while among the seventy-five other large towns the rates ranged upwards to 2.6 in Derby, 3.0 in Oldham, 3.1 in Burnley, 3.2 in Aston Manor, 3.6 in Blackburn and in Rotherham, 4.1 in St. Helens, and 6.2 in Warrington. Measles caused a death-rate of 1.4 in Croydon, in Norwich, and in Birkenhead, 1.6 in Hanley, in King's Norton and in Burnley, 1.7 in Derby, 1.8 in Hull, and 2.4 in St. Helens; scarlet fever of 1.3 in York, and 1.5 in Warrington; diphtheria of 1.8 in Rotherham; whooping-cough of 1.3 in East Ham, 1.9 in Aston Manor, 2.0 in Blackburn, and 3.1 in Warrington; and diarrhoea of 1.3 in Aston Manor. The mortality from enteric fever showed no marked excess in any of the large towns. One fatal case of small-pox was registered in Stockport, but none in any other of the seventy-six towns. The Metropolitan Asylums Hospitals contained 80 small-pox patients at the end of last week, against 118, 96, and 95 at the end of the three preceding weeks; 7 new cases were admitted during the week, against 33, 10 and 21, in the three preceding weeks. The number of scarlet fever cases in these hospitals and in the London Fever Hospital, which had been 1,663, 1,673 and 1,647, at the end of the three preceding weeks, had further declined to 1,630 at the end of last week; 206 new cases were admitted during the week, against 194, 207 and 193 in the three preceding weeks.

## HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday last, June 18th, 1,022 births and 563 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 17.6, 18.1, and 16.2 per 1,000 in the three preceding weeks, increased again last week to 17.0 per 1,000, and was 3.2 per 1,000 above the mean rate during the same period in the seventy-six large English towns. Among these

Scotch towns the death-rates ranged from 0.7 in Leith and 14.2 in Greenock to 19.1 in Dundee and 20.0 in Perth. The death-rate from the principal infectious diseases in these towns averaged 2.0 per 1,000, the highest rates being recorded in Paisley and Greenock. The 275 deaths registered in Glasgow included 3 which were referred to small-pox, 3 to measles, 2 to diphtheria, 11 to whooping-cough, and 12 to diarrhoea. Four fatal cases of measles, 2 of diphtheria, 2 of whooping-cough, and 2 of diarrhoea were recorded in Edinburgh; 6 of whooping-cough and 2 of diarrhoea in Dundee; 2 of diarrhoea in Aberdeen; 2 of "fever" in Paisley; and 5 of measles in Greenock.

## HEALTH OF IRISH TOWNS.

DURING the week ending Saturday, June 18th, 483 births and 362 deaths were registered in six of the principal Irish towns, against 558 births and 328 deaths in the preceding period. The mean annual death-rate in these same towns, which had been 16.4, 29.1, and 18.4 per 1,000 in the three preceding weeks, rose to 20.1 per 1,000 in the week under notice, this figure being 6.3 per 1,000 above the mean annual rate registered for the seventy-six English towns during the corresponding period. The figures ranged from 7.6 in Londonderry and 13.6 in Waterford to 27.3 in Limerick and 30.8 in Cork. The death-rate from the principal zymotic diseases during the same period and in the same six Irish towns averaged 0.9 per 1,000, or 0.1 higher than in the preceding week, the highest figure, 2.9, being recorded in Belfast, while Londonderry, Limerick, and Waterford recorded no deaths under this heading at all. Whooping-cough was still the principal cause of death from zymotic diseases, but measles caused 6 deaths in Belfast and 2 in Dublin. No deaths anywhere in Ireland were registered from either small-pox, scarlet fever, typhus, diphtheria, or simple continued fever, but to enteric 2 deaths were ascribed in Belfast and 1 each in Dublin and Cork.

## COMPETITION FOR POOR-LAW MEDICAL APPOINTMENTS.

WE gather from the *Cambridge Weekly News* that at a recent meeting of the Kishbrook (Suffolk) guardians the appointment of a medical officer to the Fourth District of that Union had to be considered and, if possible, settled. It appears from the report before us that in consequence of the vacancy in question the guardians had instructed their clerk to write to two medical gentlemen residing in the neighbourhood informing them that the stipend of the office was £52 per annum and at the same time inviting them to attend the next following Board meeting. These were Dr. J. R. H. Walker and Dr. T. H. Goodman, both of Haverhill, and they attended as requested. Each was separately interviewed by the Board, and after their retirement from the room, each was formally proposed and seconded to fill the vacant appointment.

The guardian who proposed Dr. Goodman followed up his recommendations by stating that Dr. Goodman had authorized him to inform the Board that he was willing to take the vacant office for a salary of £45, this being £7 per annum less than the guardians had offered to pay.

The proposal to pay a lower salary than that already fixed by the Board was ruled to be out of order by the Chairman, and Dr. Walker was subsequently appointed at the salary first offered, £52, twenty-four members of the Board voting for him, and four only for Dr. Goodman.

It is not often that we have had occasion to draw the attention of our readers to a case of this description. It is generally acknowledged that Poor-law medical officers throughout the rural districts of England and Wales have never been adequately remunerated for the responsibilities necessarily associated with the duties of their appointments, and we had supposed that the time had long passed for any such offer to be made as that announced at the recent meeting of the Kishbrook Board. It is to be hoped that the idea of accepting a lower salary than that offered by the guardians did not originate with the candidate who is said to have authorized his proposer to make it. The result of the election is sufficient to show clearly that even Boards of Guardians, holding, as most do, very economical ideas in reference to the remuneration of their medical officers, are not prepared to place confidence in any candidate who may be represented to be willing to work professionally for a lower salary than that which they regard as just and reasonable. Apart from this, medical officers of the Poor-law Service, and all candidates for such appointments, ought to know that this form of competition is not sanctioned by the Local Government Board. It is very many years since tenders were allowed to be advertised for, so as to enable guardians to fill up vacant appointments at the lowest possible cost to themselves, and it is not likely that any such objectionable procedure will ever again be allowed to come into operation.

## MILK SUPPLY OF LONDON.

A REPORT from the Public Health Committee, adopted at the last meeting of the London County Council, recommended that application should be made in the next session of Parliament for powers enabling the Council to prohibit the supply, within the county, of milk from a dairy within or without the county, if the medical officer be of opinion that infectious disease is caused, or is likely to be caused, by consumption of such milk; enabling the Council to prohibit the supply within the county of milk causing or likely to cause tuberculosis; providing for appeal against the decision of the Council in the above matters; authorizing or requiring the Council, according to the nature of the case, to allow compensation in the event of a milk supply being prohibited; enabling the Council to take samples of milk within the County; providing for penalties against persons who knowingly sell, or suffer to be sold or used, for human consumption within the county the milk of any cow which is suffering from tuberculous disease of the udder; imposing upon dairymen within the county an obligation to notify cases, or suspected cases, of tuberculous disease of the udder; requiring the isolation of any cow suffering from such disease, and enabling the Council and sanitary authorities within the county to deal with the milk which on examination appears to be so filthy as to be unfit for human food.

Two dogs suffering from hydrophobia were examined in the laboratory of the Chicago Health Department during May, and the Director has again issued a warning recommending that all dogs should be muzzled, not only for the safety of the people at large, especially children, but also for the safety of the dogs themselves.

## MEDICAL VACANCIES AND APPOINTMENTS. VACANCIES.

*This list of vacancies is compiled from our advertisement columns, where full particulars will be found. To ensure notice in this column advertisements must be received not later than the first post on Wednesday morning.*

**IRMINGHAM AND MIDLAND EYE HOSPITAL.**—House-Surgeon, resident. Salary £75 per annum.

**BRIGHTON THROAT AND EAR HOSPITAL.**—Non-resident House-Surgeon. Salary at the rate of £75 per annum.

**BOURNEMOUTH: ROYAL BOSCOMBE AND WEST HANTS HOSPITAL.**—House-Surgeon, resident. Salary, £80 per annum.

**CANTERBURY: BOROUGHS ASYLUM.**—Assistant Medical Officer, resident. Salary, £140 per annum.

**COVENTRY AND WARWICKSHIRE HOSPITAL.**—Assistant House-Surgeon, resident. Salary, £60 per annum.

**CUMBERLAND AND WESTMORLAND ASYLUM, Garlands, Carlisle.**—Junior Assistant Medical Officer, resident. Salary, £183, rising to £150 per annum.

**DERBYSHIRE ROYAL INFIRMARY.**—(1) Senior House-Surgeon (2) Assistant House-Surgeon. Salary at the rate of £100 and £60 per annum respectively.

**DOWNPATRICK: DOWN COUNTY INFIRMARY.**—House-Surgeon, resident. Salary, £61 per annum.

**EVELINA HOSPITAL FOR SICK CHILDREN, Southwark.**—Clinical Assistants for the Out-patient Department.

**FARRINGTON GENERAL DISPENSARY, 17, Bartlett's Buildings, E.C.**—Resident Medical Officer. Salary, £120 per annum.

**HUDDERSFIELD INFIRMARY.**—Junior House-Surgeon, resident. Salary £40 per annum.

**HULL ROYAL INFIRMARY.**—Casualty House Surgeon, resident. Salary, £50 per annum.

**LIVERPOOL: ROYAL SOUTHERN HOSPITAL.**—Ambulance Surgeon. Salary, £11s. per week.

**LONDON TEMPERANCE HOSPITAL, Hampstead Road.**—Resident Medical Officer. Salary, £200 per annum.

**LONDON THROAT HOSPITAL, Great Portland Street, W.**—House-Surgeon. Honorarium at the rate of £50 per annum.

**MARGATE: ROYAL SEA-BATHING HOSPITAL.**—Resident Surgeon to act as junior and senior for six months each. Salary at the rate of £50 and £120 per annum respectively.

**METROPOLITAN HOSPITAL, Kingsland Road, N.E.**—Assistant Physician.

**NATIONAL HOSPITAL FOR DISEASES OF THE HEART, Scho Square, W.**—Assistant Physician.

**NORTH-EASTERN HOSPITAL FOR CHILDREN, Hackney Road.**—Assistant Surgeon.

**POPULAR HOSPITAL FOR ACCIDENTS.**—Assistant House-Surgeon, resident. Salary at the rate of £50 per annum.

**ST. MARY'S HOSPITAL MEDICAL SCHOOL, Paddington.**—Lecturer on Chemistry.

**STAMFORD, RUTLAND, AND GENERAL INFIRMARY.**—House-Surgeon, resident. Salary, £100 per annum.

**SOUTHPORT INFIRMARY.**—Resident Junior House and Visiting Surgeon. Salary at the rate of £70 per annum.

**STOCKPORT INFIRMARY.**—Junior Assistant House-Surgeon, resident. Salary at the rate of £40 per annum.

**STOCKTON-ON-TEES: STOCKTON AND THORNABY HOSPITAL.**—House-Surgeon. Salary, £250 per annum.

**WEST BROMWICH DISTRICT HOSPITAL.**—Resident Junior House-Surgeon. Salary, £50 per annum.

## APPOINTMENTS.

**BEYERS, Edmund C. M.A., M.B., B.Ch. Oxon., M.R.C.S., L.R.C.P.,** Honorary Assistant Surgeon to the Royal General Dispensary, Oxford.

**BRYAN, J. M., M.R.C.S., L.R.C.P. Lond.,** Public Vaccinator St. Giles's and St. Andrew's Districts of the Northampton Union.

**COOPER, Austin, B.A., M.D., B.Ch.,** Honorary Assistant Anaesthetist to St. John's Hospital for Diseases of the Skin, Leicester Square.

**CRAWFORD, W. T., M.B.,** Medical Officer to the Workshop Union Infirmary.

**DAVIS, Henry J., M.A. Cantab., etc., M.R.C.P. Lond.,** Assistant Physician in charge of the Throat and Ear Department, West London Hospital.

**EDDINGS, F. R., M.R.C.S., L.R.C.P. Lond.,** Medical Officer of Health, Bedale Rural Sanitary District.

**FIELDING-GOULD, Robert, M.A., M.D. Oxon.,** Pathologist to the City of London Hospital for Diseases of the Chest.

**FRASER, K. M.B.,** Certifying Factory Surgeon for the Orrell District, Lancaster.

**HOBSON, H. Overton, M.D.,** Egyptian Government Inspector to the Baths and Springs, Meouan, Egypt, vice W. Page May, M.D., D.Sc., F.R.C.P., resigned.

**LESLIE, G. S., M.B., C.M. Edin.,** Medical Officer of Health to the Fallsworth Urban District.

**MCCAUGHEY, F. H., M.B., B.S.R.U.I.,** Resident Assistant Medical Officer to the Bradford Union Workhouse.

**MCCRACKEN, J. S., M.B., C.M. Edin.,** Honorary Physician to the Hospital for Sick Children, Newcastle-upon-Tyne.

**MONTGOMERY, W. M., M.B., D.P.H. Camb.,** District Medical Officer of Health for the Eastern Transvaal.

**MOODIE, D., L.R.C.P. & S. Edin., L.F.P.S. Glasg.,** District Medical Officer of the Durham Union.

**NESBITT, R. G., L.R.C.P. & S.I.,** Medical Officer of Health to St. Just District Council.

**RICHARDS, T. L.R.C.P., M.R.O.S. Eng.,** District Medical Officer of the Cardiff Union.

**THOMPSON, George Wm., M.B., C.M. Edin., F.R.C.S. Eng.,** Surgeon to the Western Ophthalmic Hospital, Marylebone Road.

**WALKER, J. E. Hall, M.D. Edin.,** Medical Officer and Public Vaccinator for the Fourth District of the Ribblesdale Union.

**WILLIAMS, B. M., M.B.,** District Medical Officer of the Bangor and Beaumaris Union.

**WHEELER, W. I. de Courcy,** Visiting Surgeon to Mercer's Hospital, Dublin.

**WILKES, J. Hamilton, L.D.S., R.C.S.,** Honorary Dental Surgeon to St. John's Hospital for Diseases of the Skin, Leicester Square.

## DIARY FOR NEXT WEEK.

### MONDAY.

**Odontological Society of Great Britain, 20, Hanover Square, W., 8 p.m.**—Annual General Meeting. Valuedictory Address by the President. Casual communications by Mr. Vernon Knowles, Mr. E. Freedy, and Mr. J. F. Colyer.

### SATURDAY.

**Pathological Society of London, Lister Institute, Queensberry Lodge, Elstree, in the afternoon.**

### POST-GRADUATE COURSES AND LECTURES.

**Charing Cross Hospital, Thursday, 4 p.m.**—Demonstration of Gynaecological Cases.

**Hospital for Consumption and Diseases of the Chest, Brompton, Wednesday, 4 p.m.**—Lecture on Chest Disease and Life Assurance.

**Hospital for Sick Children, Great Ormond Street, W.C., Thursday, 4 p.m.**—Lecture on Cases illustrating the results of Surgical Treatment of Infantile Diseases.

**Medical Graduates' College and Polyclinic, 23, Chenier Street, W.C.**—Demonstrations will be given at 2 p.m. as follows: Tuesday, Medical; Wednesday, Surgical; Thursday, Surgical; Friday, Throat. Lectures will be delivered at 5.15 as follows: Monday, Observations on Diet; Tuesday, Cardiac Failure; Wednesday, Some useful Appliances in the Treatment of Diseases of the Ear, Throat, and Nose.

**Mount Vernon Hospital for Consumption and Diseases of the Chest, 7, Fitzroy Square, W., Thursday, 5 p.m.**—The Treatment of Asthma (illustrated by cases).

**National Hospital for the Paralyzed and Epileptic, Queen Square, W.C.**—Lectures will be delivered at 8.30 p.m. as follows: Tuesday, Syphilitic Diseases of the Nervous System; Friday, Cerebral Diplegia.

**North-East London Post-Graduate College, Tottenham Hospital, N., Wednesday, 4.30 p.m.**—Lecture on the Induction of General Anaesthesia.

**Post-Graduate College, West London Hospital, Hammersmith Road, W.**—Lectures will be delivered at 5 p.m. as follows: Monday, Practical Surgery; Tuesday, Idiocy and Imbecility (at the Asylum for Idiots, Harlowood, at 2.30 p.m.); Wednesday, Development of the Teeth; Thursday, Hernia; Friday, Public Health.

**St. John's Hospital for Diseases of the Skin, Leicester Square, W.C.**—Thursday, 6.15 p.m., Lecture on Tuberculosis of the Skin.

**St. Peter's Hospital, Henrietta Street, W.C.**—Lecture-Demonstrations will be given at 3.30 p.m. as follows: Monday, Cases in the Wards; Thursday, Electric Illumination of the Urethra and Bladder.

**Samaritan Free Hospital for Women, Marylebone Road, N.W.**—Thursday, 8 p.m.—Lecture on Inflammation of the Uterus.

## BIRTHS, MARRIAGES, AND DEATHS.

*The charge for inserting announcements of Births, Marriages, and Deaths is 3s. 6d., which sum should be forwarded in post-office orders or stamps with the notice not later than Wednesday morning, in order to ensure insertion in the current issue.*

### BIRTHS.

**FAIRLEY.**—On June 17 h. at West Bank, Gravelly Hill, Birmingham, Helen Fairley, L.R.C.P. & S., wife of S. B. Fairley, M.D., of a son.

**GRIFFITH.**—June 16th, at 1 Hargrave Terrace, Terenure Road, Dublin, the wife of Albert E. Griffith, L.R.C.P. & S.E., of a son.

**MURRAY.**—On June 15th, at 6 Langham Mansions, Earl's Court Square, S.W., the wife of William Murray, M.B., Ch.B. Edin., D.P.H. Lond., of a son.

**TURNER.**—Oundle, Northamptonshire, June 15th, the wife of B. Roworth Turner, M.B., of a son.

**WISE.**—On June 11th, at 302, High Street North, East Ham, the wife of J. Neville Blithe, M.B. Ch.S., L.R.C.P. Lond., of a son.

### MARRIAGES.

**SAWARD-WHITTEN.**—On June 20th, at St. George's, Hanover Square, W., by the Rev. F. P. Woodward, M.A., Arthur H. M. Seward, M.D., Ch.S. Eng., L.R.C.P. Lond., of Richmond, Surrey, to Violet, eldest daughter of the late A. J. Whitten, J.C.S., of Upper Norwood.

**STABB-RANSOME.**—On June 20th, at Holy Trinity, Marylebone, by the Rev. H. O. Ransome, M.A. (brother of the bride), assisted by the Rev. W. S. King, M.A., Dr. Arthur Francis Stabb, of 132, Harley Street, W., to Florence Gertrude, second daughter of James Edward and Alice Ransome, of Holme Wood, Ipswich.

**WILL-PILBROW.**—On June 22nd, at St. Andrew's Presbyterian Church, Upper Norwood, by the Rev. J. C. Train, H. Onshelm Will, M.B. Ch.S., L.R.C.P. Lond., son of J. H. Will, Esq., of Finsbury Park, to Jessie, daughter of J. S. Pilbrow, Esq., of Sjenban Hill.

## LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

COMMUNICATIONS respecting Editorial matters should be addressed to the Editor, 2, Agar Street, Strand, W.C., London; those concerning business matters, advertisements, non-delivery of the JOURNAL, etc., should be addressed to the Manager, at the Office, 429, Strand, W.C., London.

ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the BRITISH MEDICAL JOURNAL alone, unless the contrary be stated.

AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL are requested to communicate with the Manager, 429, Strand, W.C., on receipt of proof.

CORRESPONDENTS who wish notice to be taken of their communications should authenticate them with their names—of course not necessarily for publication.

CORRESPONDENTS not answered are requested to look at the Notices to Correspondents of the following week.

MANUSCRIPTS FORWARDED TO THE OFFICE OF THIS JOURNAL CANNOT UNDER ANY CIRCUMSTANCES BE RETURNED.

IN order to avoid delay, it is particularly requested that ALL letters on the editorial business of the JOURNAL be addressed to the Editor at the Office of the JOURNAL, and not at his private house.

TELEGRAPHIC ADDRESS.—The telegraphic address of the EDITOR of the BRITISH MEDICAL JOURNAL is *Atiology, London*. The telegraphic address of the MANAGER of the BRITISH MEDICAL JOURNAL is *Articulate, London*.

TELEPHONE (National).—GENERAL SECRETARY AND MANAGER. EDITOR, 2631, Gerrard. 2630, Gerrard.

Queries, answers, and communications relating to subjects to which special departments of the BRITISH MEDICAL JOURNAL are devoted will be found under their respective headings.

### QUERIES.

WE would request correspondents who desire to ask questions in this column not to make use of such signatures as "A Member," "A Member B.M.A.," "Enquirer," and so on. By attention to this request much confusion would be avoided. Correspondents are asked to write upon one side of the paper only.

L. H. would be glad to hear suggestions as to the cause of three cases of simple jaundice occurring amongst the children of a household. The children were all strong and healthy and the cases followed one another, and all happened within a month.

### VETERINARY SURGEON'S CHARGES.

H. R. who has received a bill for £3 ss. 6d. from a veterinary surgeon in a country village for attending his horse for ten days asks whether the charges are reasonable; the charge for a visit was 1s., and for a drench, 2s., as many as three drenches a day being given.

\*We have made inquiries and are informed that the charge for a drench for a horse varies from 1s. 9d. wholesale to 2s. 6d. retail; the charge of 1s. a visit is regarded as very cheap, even though the veterinary surgeon lived quite close by. The daily average for the attendance of a veterinary surgeon including the drenches may be taken to be about s.; three drenches daily would not be excessive in certain cases. On the whole it may be said that the charges are not excessive.

THE  
**British Medical Journal.**

THE JOURNAL OF THE BRITISH MEDICAL ASSOCIATION.

**SUPPLEMENT**

CONTAINING

PROCEEDINGS OF COUNCIL

REPORTS OF STANDING COMMITTEES

MEETINGS OF BRANCHES AND DIVISIONS

PROGRAMME OF ANNUAL MEETING

MEDICAL BILLS IN PARLIAMENT

PROCEEDINGS OF THE GENERAL MEDICAL COUNCIL

REPORT ON THE POOR-LAW MEDICAL SYSTEM IN IRELAND,

Etc.

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VOLUME I 1904.

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